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Alexandria, Virginia 22313-1450 or Fax (571)-273-2885

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maintenance fee notification	ns.		, open,							
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)					Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.					
20995 75	0 03/06/2006				ve its own ce	runcate	or maining or	THISMISSION.		
KNOBBE MARTENS OLSON & BEAR LLP 2040 MAIN STREET FOURTEENTH FLOOR					Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.					
IRVINE, CA 9261	4				Nancy	W.	Vensko	Reg	36, 29 (Depositor's name)	
		L	1 to plane			1	(Signature)			
		June 5, 2006					(Date)			
APPLICATION NO.	FILING DATE		FIRST NAME	T NAMED INVENTOR			ATTORNEY DOCKET NO.		CONFIRMATION NO.	
10/014,162	AP 144 1844   MACHINE ARABARA ARALIAN									
TITLE OF INVENTION: PARATHYROID HORMONE RECEPTOR LIGANDS 06/08/2006 RB12UNE2 00000008 10014162										
				; 01 FC:11 02 FC:11			504		1400.00 OP 300.00 OP	
APPLN. TYPE	SMALL ENTITY	ISSUE FI	EE	PUBL	UBLICATION FEE		TOTAL FEE(S) DUE		DATE DUE	
nonprovisional	NO	\$1400	)	\$300			\$1700		06/06/2006	
EXAMINER		ART UN	ART UNIT		CLASS-SUBCLASS					
ROMEO, DAVID S 164				514-012000						
<ol> <li>Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).</li> <li>Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.</li> <li>"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.</li> </ol>			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.  1 KNOBBE, MARTENS,  2 OLSON & BEAR, LLP							
3. ASSIGNEE NAME AND	RESIDENCE DATA TO B	E PRINTED ON T	HE PATENT	(print or t	ype)					
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.										
(A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  (CITY and STATE OR COUNTRY)										
The Government of the United States of America, as represented by the Secretary, Department of Health and Human Services Washington, D.C.										
Please check the appropriate assignee category or categories (will not be printed on the patent):  Individual  Corporation or other private group entity  Covernment										
4a. The following fee(s) are	englosed	/h	. Payment of	Faa(s):					<u></u>	
Issue Fee	enciosed.	40	A check i		int of the feet	(s) is enc	losed.			
Publication Fee (No s		credit card. Form PTO-2038 is attached.								
Advance Order - # of	The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 1 - 1 1 1 U (enclose an extra copy of this form).									
5. Change in Entity Status	(from status indicated above	)					· · · · · · · · · · · · · · · · · · ·		-	
a. Applicant claims Sl	b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).									
The Director of the USPTO NOTE: The Issue Fee and Printerest as shown by the reco	is requested to apply the Issuablication Fee (if required) vords of the United States Pate	e Fee and Publicat will not be accepted out and Trademark	tion Fee (if an I from anyone Office.	y) or to re- other than	apply any pr the applican	reviously it; a regis	paid issue fe tered attorne	e to the application or agent; or t	ation identified above. he assignee or other party in	
Authorized Signature	Janus				Dote	June				

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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Typed or printed name Nancy W. Vensko

Registration No. 36, 298

Docket No.:

NIH175.001C1

June 5, 2006 Page 1 of 1

## Please Direct All Correspondence to Customer Number 45311

## ISSUE FEE TRANSMITTAL LETTER

Applicant

Usdin et al.

App. No

: 10/014,162

Filed

: December 11, 2001

For

PARATHYROID HORMONE

**RECEPTOR LIGANDS** 

Art Unit

1647

Class/Sub-Class

514/012000

Examiner

Romeo, David S.

## CERTIFICATE OF MAILING

I hereby certify that this correspondence and all marked attachments are being deposited with the United States Postal Service as first-class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on

June 5, 2006

(Date)

Nancy W. Vensko, Reg. No. 36,298

## MAIL STOP ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

Enclosed for filing is the Issue Fee for the above-identified application:

- (X) Form PTOL-85.
- (X) A check in the amount of \$1730 is enclosed for the following fees:
  - (X) \$1400 Issue Fee
  - (X) \$300 Publication Fee
  - (X) \$30 Advance Order of 10 Copies
- (X) Return prepaid postcard.

The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment, to Account No. 11-1410.

Nancy W. Wensko

Registration No. 36,298 Attorney of Record

Customer No. 45,311

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PA-124

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